

# 497 Contribution Report

Amounts may be rounded to whole dollars.

|  |   |   |  |                            |
|--|---|---|--|----------------------------|
| NAME OF FILER<br><i>NORMAN W. KYRISS III</i>   |   | Date of This Filing<br><i>8/13/2020</i>   | Date Stamp<br><b>Received</b><br>Office of the City Manager<br><div style="color: red; font-weight: bold; font-size: 1.2em;">AUG 13 2020</div> | <b>CALIFORNIA FORM 497</b> |
| AREA CODE/PHONE NUMBER<br><div style="background-color: black; width: 100px; height: 20px;"></div> | I.D. NUMBER (if applicable)<br><div style="background-color: black; width: 100px; height: 20px;"></div> | Report No. _____<br><br><input type="checkbox"/> Amendment to Report No. _____<br>(explain below)<br><br>No. of Pages _____ | For Official Use Only  |                            |
| STREET ADDRESS<br><div style="background-color: black; width: 100px; height: 20px;"></div>         |   |   |  |                            |
| CITY<br><i>Hemet</i>   | STATE<br><i>CA</i>  | ZIP CODE<br><i>92544</i>  |  |                            |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE*   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED  |
|---------------|---|---|---|--|
| 8/13/2020     | The Cotton Corporation<br>990 W. FLORIDA AVE<br>Hemet CA 92543                                  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | \$1,000.-<br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate              |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate              |

Reason for Amendment: \_\_\_\_\_

\* Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee